

# Part II of Peer Support Group Facilitation Skills: Dealing with Challenges in Groups



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**VA** | Defining  
**HEALTH CARE** | **EXCELLENCE**  
in the 21st Century

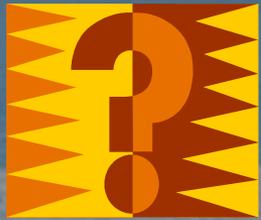
# Learning Objectives



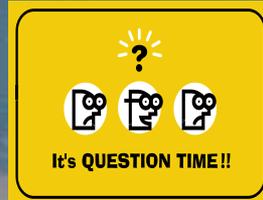
- Briefly review general group facilitation guidelines pertaining to:
  - Planning a Department of Veterans Affairs (VA) peer support group
  - Developing a peer support group comfort agreement
  - Using your personal recovery story in group discussion
  - Using verbal and nonverbal behaviors that promote conversation in the peer support group
- Describe ways to address cross-talking, side-talking, and other challenging behaviors in a peer support group.
- Practice facilitating a peer support group.



# **Brief Review of Facilitator Roles & Skills**



# What is a peer support group facilitator?



The facilitator's role in a peer support group is NOT to “process” the group members' thoughts and feelings. Rather, the facilitator's roles in a peer support group are to:

- Create a safe, welcoming environment for Veterans to feel comfortable sharing their personal experiences and learning from one another.
- Act as a role model by sharing aspects of the facilitator's own recovery story that apply to the group's discussion.
- Share appropriate and relevant resource information with group members.
- Teach group members a skill that is relevant to the group's focus. Curriculum-based peer support groups support this role.



# Group Planning: Questions to Answer

- What type of peer support group do you want to facilitate?
- Who are your target participants?
- Who will be your supervisor?
- Where and when will your group occur?
- How will you market your peer support group?

# Types of Peer Support Groups

Generally, there are three models for structuring a peer support group:

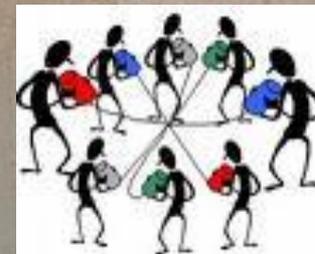
➤ Curriculum-Based



➤ Topic-Focused



➤ Open Forum



# Planning Logistics



- Ask your supervisor or program/staff liaison about the VA program's policies and rules (Ex. Limits of confidentiality).
- Work with program staff to pre-plan what you need to do if there is an emergency situation in your peer support group.
- Ask your supervisor or program/staff liaison if you need to do any documentation regarding the peer support group meetings. If so, ask specifically what is required.
- Be sure to arrive early for the group meetings so you can arrange the chairs in the room, if needed.
- After the group meetings, put chairs back in their original places and throw away any garbage left by the group members.
- Plan time to debrief with your co-facilitator after each group meeting. Meet in a location where you will have privacy.

# Overseeing Group Experience

The peer support group facilitator oversees the direction of the group experience using both content and process.

## ➤ Content/Dialogue

- What the group discusses



## ➤ Process/Facilitation

- How the discussion is helped to occur



# Elements of Comfort Agreement

A comfort agreement includes:

- Role of facilitator—what it is and what it is not
- Start and stop time for group meetings
- How members will be informed about group cancellation in case of emergency
- Attendance expectations (if any)
- Confidentiality and its limits



# Elements of Comfort Agreement

## (Continued)



- Individual and group safety expectations
  - What can and cannot be said or done in meetings
- Documentation about meetings (if required)
  - What is included and what is not included
- Group etiquette
  - What can and cannot be said or done in meetings

# Examples of Comfort Agreement (Continued)

## Examples of Comfort Agreement Content

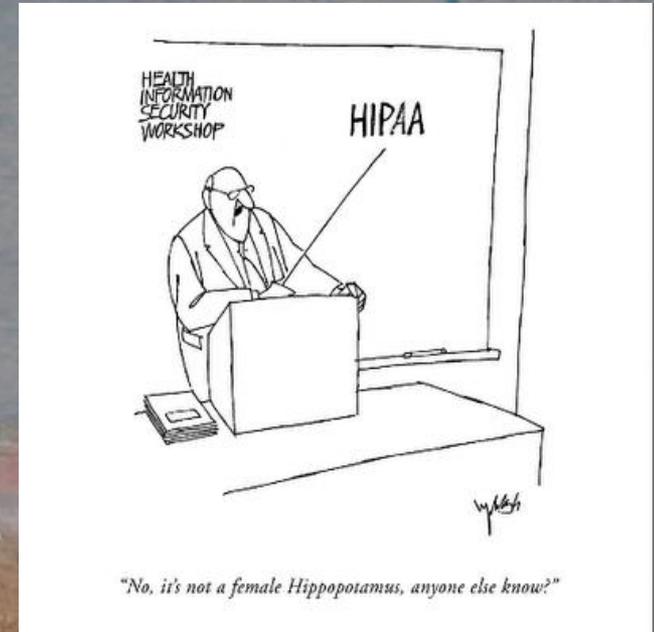
- No personal attacks
- Start and end on time
- Bathroom breaks
- One person talks at a time
- Avoid cross-talk and side-talk
- No threatening behavior
- What is said here, stays here\*\* (There are limits to confidentiality)
- Discuss limits of confidentiality



# Limits of Confidentiality

- Threat of harm to oneself (suicidal)
- Threat of harm to others (homicidal)
- Suspected child abuse
- Suspected elder abuse
- Weapon on VA property
- Suspected alcohol or drug abuse\*\*

\*\*Depending on the VA program where you are working, you may be required to report suspected or known substance abuse.



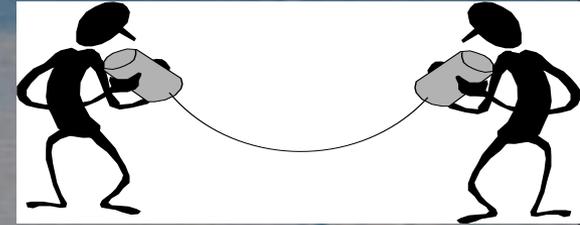
# Sharing Your Personal Recovery Story: Crafting Components of Your Recovery Story

- What were some of the early indications that you were beginning to have difficulties?
- Describe yourself and your situation when you were at your worst.
- What helped you move from where you were to where you are now?
- How did you accomplish this? What did you do? What did others do to help you?
- What have you had to overcome to get where you are today?

# Components of Your Recovery Story (Continued)

- What have you learned about yourself and your recovery?
- What are some of the strengths you have developed?
- What types of supports have you developed and used?
- What are some of the things you do to stay on your wellness path?

# Communicating Your Recovery Story



- What is the other person willing to hear?
  - Use where the Veteran is in his/her recovery as a guide to which part(s) of your story to share.
  - Give careful consideration to the part(s) of your recovery story that may be helpful to the Veteran at this time in his/her recovery.
- Am I involving the Veteran in the conversation, or am I talking at him/her?
- Find a balance between the benefits of sharing your illness and recovery stories!
- Use brief snippets of your recovery story as applicable. Remember though, the purpose of sharing is to help others, so the focus should not stay on you for long.

# Effective Communication: Questioning

## Close-Ended Questions

- Ask questions beginning with
  - Why...
  - Is...
  - Are...
  - Were...
- Usually calls for a “yes” or “no” answer
- “Why” questions call for a rationalization and could put a person on the defensive
- May cut off a conversation

## Open-Ended Questions

- Ask questions beginning with
  - Where...
  - When...
  - What...
  - Which
  - How...
- Ask for information needed to help clarify an issue or inquire about feelings to share
- Tend to keep a conversation going

# Open-Ended Questions Examples

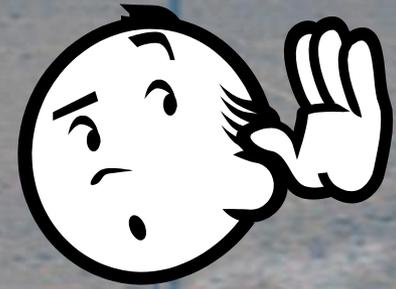
- What's on your mind?
- How can I help you?
- What happened next?
- When do you remember first having this problem?
- How do you feel about that?
- What helped? What did not help?
- What do the rest of you think about what was just said?



# Effective Communication: Listening

## Attending Listening Skills

- Maintain a relaxed posture and lean forward.
- Nod your head occasionally.
- Maintain culturally appropriate eye contact.
- Keep your tone of voice neutral, positive, and relaxed.
- Sit facing the group participants with your arms at your side.
- Keep a friendly expression.
- Move away from any physical barrier (i.e., desk; table) between you and the group participants.
- Use minimal encouragers to keep the conversation going.
- Remain silent.
- Avoid distracting motions and gestures.

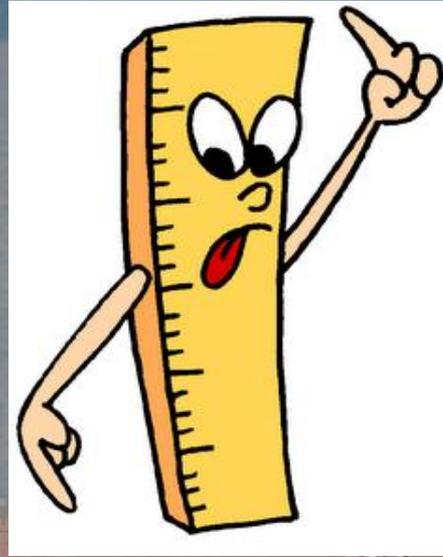


# Effective Communication: Responding



- Pay close attention to the other person's viewpoint and avoid interpreting or assuming.
- You do not have to have all the answers. It is OK to say, "I don't know."
- Do not immediately react to your own feelings.
  - Remember the person's feelings are not directed at you.
  - Do not take what is said personally.
- Wait until the other person is finished speaking before you start talking.

# Golden Rules of Group Facilitation



- When in doubt about what to do, ask the group!
  - “What do you want to talk about?”
  - “What should we be focusing on right now?”
- Group members should talk more than the group facilitator.
  - 20-30% Facilitator Talk vs. 70-80% Group Members Talk

# 4 “B’s”: General Tips for Success

- **Be on time** for your group meetings and supervision.
- **Be respectful** in your interactions with everyone.
- **Be responsible**
  - Give advance notice to your group members, co-facilitator, and supervisor if you cannot attend a meeting.
  - Get VA clinical staff members involved when you are concerned a group member is in crisis.
- **Be dependable**
  - Show up when and where you are expected to be for meetings.

A landscape painting of a beach. The sky is a deep, clear blue. The water is a lighter, shimmering blue. The beach is a wide, sandy expanse in the foreground. In the distance, a row of buildings with red roofs is visible. The overall style is impressionistic, with visible brushstrokes and a soft focus.

# **Managing Challenges in Your Peer Support Group**

# Focus on Needs & Experiences of Group Members

The peer support group facilitator models facilitation skills by focusing on the needs and experiences of group members.

- Use listening and question-asking skills
- Use “I” statements
- Work with silence
- Timely self-disclosure

# Unexpected Group Detours

Sometimes, despite the facilitator's best efforts, the group's direction can take an unexpected turn.

## Common Detours

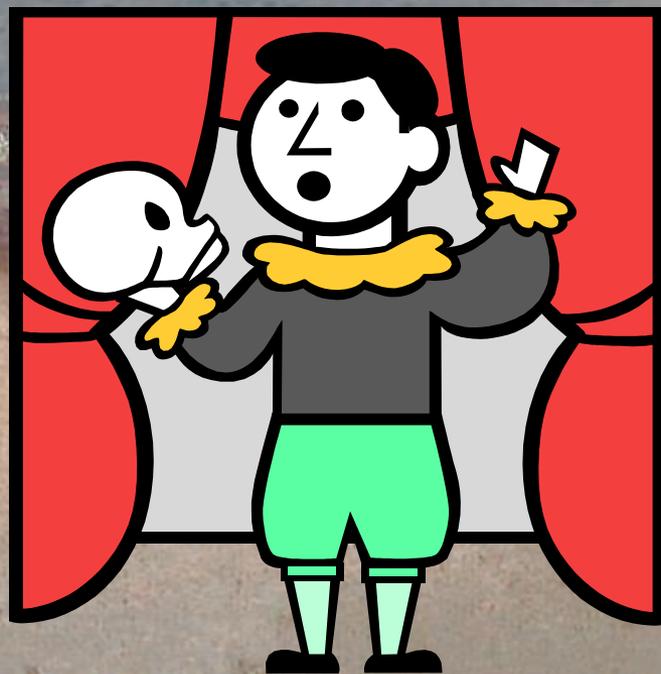
- Participants will not talk and there are long periods of silence (the NOTHINGNESS)
- Someone is always trying to tell other group participants what they “should” do or is trying to “solve their problems” (the PROBLEM-SOLVER)
- Group gets off track or participant(s) talk about everything except their experience (the SIDETRACKER)
- One person dominates the discussion or wants the group to focus on “his/her” issue (the DOMINATOR)
- Group participant is talking over other participants or is otherwise disruptive (the DISRUPTER)
- Group participant expresses thoughts of harming self or others (CRISIS)

# Detour: The Nothingness

Silence can be a good thing at times. However, if it seems like the silence is dragging on too long and no one is speaking, the peer support group facilitator can try one of the following strategies to spark participation.

- Give voice to the silence (Ex. Ask the group what the silence means)
- Reflect on the silence
- Suggest possible next step and open for a group vote

# Role Play



# Detour: The Problem-Solver

If a group member often tells others how to solve their problems (“I’ll tell you what you should do”), the peer support group facilitator can try one of the following strategies.

- Remind the group about the comfort agreement
  - No cross-talk
  - No feedback unless requested
  
- Check in with the group to see what they think about what is happening

# Role Play

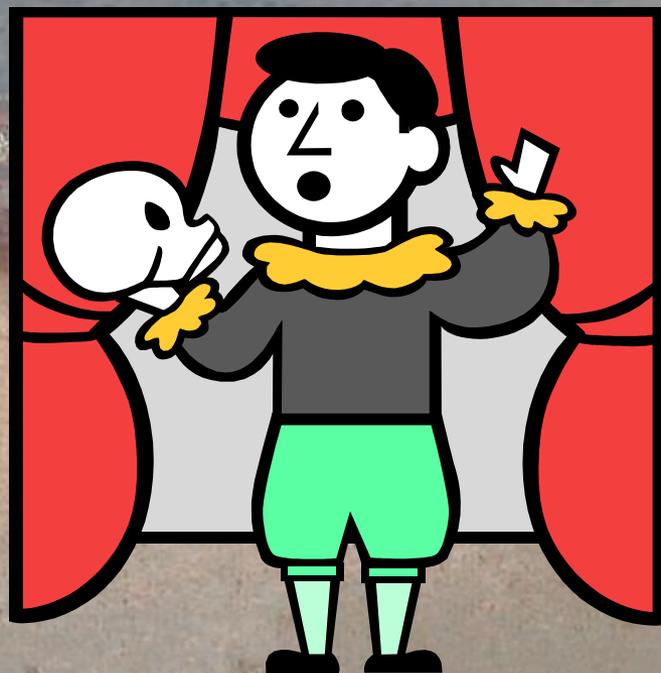


# Detour: The Sidetracker

If the group seems off-topic or participants discuss things unrelated to the group discussion, the peer support group facilitator can try one of the following strategies.

- At the beginning of the group, ask, “What should we do if we notice side-tracking?”
- Check in with the group to see if a new topic is of interest. (Ex. “We started off talking about ways to get connected with a Primary Care doctor and have started talking about the new McDonalds out on Great Road. Would you (the group) like to continue with that or move back to the Primary Care discussion?”)
- Create a “parking lot” sheet and post it on a side wall to jot down side topics to come back to if there is time later.

# Role Play



# Detour: The Dominator

If one group member seems to do most of the talking and requires the group to focus on his/her issue, the peer support group facilitator can try one of the following strategies.

- Set norm of checking in with all group members as part of the comfort agreement.
- Interrupt by:
  - Reflecting on the DOMINATOR's sharing (Ex. "Jeff, you have been telling all of us about your challenges managing your diabetes.")
  - Pointing out the need to hear from others (Ex. "It would be good to hear from others about their experience.")
  - Calling on someone if necessary (Ex. "Ann, do you have anything to add?")

# Role Play



# Detour: The Disrupter

If a group member talks over other group members or initiates a conversation on the side with someone during the group, the peer support group facilitator can try one of the following strategies:

- Remind everyone of the relevant group comfort agreement rules (ex. only one person speaks at a time; there is no side-talking).
- Try to have the disruptive group member refocus on the group discussion by asking if he/she has anything to add to the topic currently being discussed by the rest of the group.

# Detour: Crisis

Occasionally, you may have a Veteran in your peer support group who is struggling with thoughts of suicide.

## Warning Signs

- Expresses feelings of hopelessness—feeling like there is no way out of the Veteran’s current situation.
- Engages in risky activities without thinking.
- Observable changes in the Veteran’s behavior:
  - Appears agitated
  - Appears more anxious than usual
  - Demonstrates rage or anger
  - Withdraws from family and friends
  - Increase in alcohol and/or drug abuse and/or other self-destructive behavior
- Makes statements about thinking of hurting or killing oneself.
- Talks about death, dying, or suicide.
- Talks about “giving up,” “going away,” and/or giving away possessions.

# Detour: Crisis

- Work with VA clinical staff members to pre-plan what you need to do if there is an emergency situation in your peer support group. Know the emergency procedures for the location where your group is taking place so that you can get help IMMEDIATELY if needed.
- Do NOT leave the Veteran in crisis alone. Have the Veteran stay with you or stay with your group co-facilitator while you get help from the clinical staff member(s) on duty.

## Interventions:

- 2 Group Facilitators: One facilitator accompanies the Veteran to speak with clinical staff nearby, and the other facilitator continues meeting with the rest of the group.
- 1 Group Facilitator: The situation could be handled in one of two ways:
  - Continue the group and encourage the group members to listen and provide support to the Veteran while he/she talks about his/her current problem if the Veteran wants to talk. Obtain clinical staff assistance after the group meeting.
  - Ask the group to continue while the facilitator steps out of the room to get additional help for the Veteran from VA clinical staff members.

# Group Facilitation Practice Exercise



# Group Discussion of Peer Support Group Facilitation Practice Exercise



# References

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Transformation Center (2007, March). Using support groups to promote and sustain recovery. *Peer specialist certification training* (Session 21, pp. 1-6). (Available from the Transformation Center, 98 Magazine Street, Roxbury, MA 02119).

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